

CLAIMS ONLY						Application Number	Filing Date	
						10711063		Applicant(s)
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1							
2		1						
3								
4		1						
5								
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15	1							
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47								
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49								
50								
Total Indep	2							
Total Depend	15							
Total Claims	17							